



**STRUCTURAL PEST CONTROL BOARD**  
 1418 HOWE AVENUE, SUITE 18, SACRAMENTO, CA 95825  
 Administration (916) 561-8700  
 Licensing (916) 561-8704  
 Complaint (916) 561-8708  
 FAX (916) 263-2469  
[www.pestboard.ca.gov](http://www.pestboard.ca.gov)



## APPLICATION FOR CONTINUING EDUCATION ACTIVITY

Please complete this request and return with:

1. Course outline (hour by hour)
2. Copies of all materials (textbooks, handouts, etc.)
3. Copies of all examinations
4. Copies of any promotional materials
5. Copy of certificate of completion and evaluation form provided to licensees
6. \$25 Fee

**FEE \$25**

**NOTE:** APPLICATION FOR CONTINUING EDUCATION INSTRUCTOR IS ON THE REVERSE SIDE OF FORM.

NAME OF PROVIDER		CONTACT PERSON	TELEPHONE NO.
ADDRESS			
TITLE OF ACTIVITY		FEE CHARGED	
DATES OFFERED		CLASSROOM HOURS	
CONTINUOUS {}		ONE TIME ONLY {}	
TYPE OF ACTIVITY TO BE OFFERED:		{} TECHNICAL ACTIVITY      {} PROFESSIONAL ACTIVITY      {} RULES & REGULATIONS {} CORRESPONDENCE ACTIVITY      {} IN-HOUSE TRAINING      {} ASSOCIATION MEETING	
BRIEF DESCRIPTION OF ACTIVITY			
METHOD OF EVALUATION			
<b>DO NOT WRITE BELOW THIS LINE</b>			

ACTIVITY # \_\_\_\_\_

☐ APPROVED      ☐ DENIED

HOURS \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

RULES & REGULATIONS {}

GENERAL {}

TECHNICAL {} Branch 1 {} Branch 2 {}  
 Branch 3 {}

\_\_\_\_\_  
DATE

## INSTRUCTOR APPLICATION

NAME	TELEPHONE NO.
ADDRESS	
Name of Activity to be Instructed	
Name of Provider	
1953(d)(4) of the Structural Pest Control Boards Rules and Regulations states that instructors for continuing education must be credential instructors or meet two of the below equivalent experience requirements.	

## EDUCATION

Credentialed Instructor in Course Area? { } YES { } NO	Course of Study		
School/College/University	Degree Received	Year Received	

## EQUIVALENT EXPERIENCE

LIST TRAINING ACTIVITIES COMPLETED IN SUBJECT MATTER
LIST ACTIVITIES YOU HAVE INSTRUCTED ON THE SUBJECT MATTER

ARE YOU LICENSED BY THE STRUCTURAL PEST CONTROL BOARD? (If yes, list License No.(s) { } YES { } NO #	DID YOU AUTHOR THE COURSE? { } YES { } NO
---	--

LIST EMPLOYMENT FOR THE LAST THREE YEARS

The information on this application is required pursuant to section 8500 inclusive of the Business and Professions Code and is maintained by the Structural Pest Control Board, 1418 Howe Avenue, Ste. 18 Sacramento, CA 95825-3280, (916) 561-8704. All information requested in this application is mandatory. Failure to provide any of the requested information will result in the application being rejected as incomplete. This information may be transferred to other law enforcement agencies. You have a right of access to records maintained by this agency which contain personal information about you.

SIGNATURE	DATE
-----------	------